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PTO/CRMS (08.03)

Application for Oocket Number 6 PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) NUMBER EXTRA NUMBER FILED RATE RATE FOR FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAILS minus 20 = x s 0R x s (37 CFR 1,15(c)) INDEPENDENT CLAIMS minus 3 OR MULTIPLE DEPENDENT CLAIM PRESENT (37'CFR 1.16(d)) OR TOTAL " If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY (Column 1) HIGHEST CLAIMS 4 PRESENT ADDI-RATE ADDI-RATE REMAINING NUMBER PREVIOUSLY **EXTRA** TIONAL TIONAL **AMENDMENT** AFTFR AMENDMENT PAID FOR FEE FFF 20 Minus AC Total (37 CFR 1.15(cl) OR Independent (37 CFR 1,15(b)) Minus x s OR FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Catumn 1) (Column 2) (Cotumn 3) CLARMS HIGHEST ADDI-TIONAL PRESENT Θ RATE NUMBER REMAINING **FXTRA** TIONAL AFTER PREVIOUSLY **AMENDMENT** FEE AMENDMENT PARDFOR FEE Total (37 CF3 1.16(cf) 150 x 550 = OR Mirws x \$60 . independent (3) CFR 1.16(b)) x s 200 = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL 50 ADD'L FEE OR ADD'L FEE (Cotumn 2) (Column 3) (Column 1) HIGHEST CLAMS O PRESENT RATE ADDI-RATE ADDI REMAINING NUMBER AFTER AMENDMENT TIONAL PREVIOUSLY **EXTRA** TIONAL ENDMENT FEE FEE PAID FOR Total Minus OR Minus OR ξ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE 1 5 1.

This collection of information is required by 37 CFR 1,16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1,14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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[.] If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

[&]quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.